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**PATENT** 

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Peter David Davis

Serial No.:

09/890989

Art Unit:

1642

Filed:

December 14, 2001

Examiner:

Misook Yu.

For:

Combinations for the Treatment of Diseases Involving Angiogenesis

Attorney Docket No.:

U 013589-7

Commissioner for Patents P.O. Box 1450 Arlington, Virginia 22313-1450

## RESPONSE TO OFFICE ACTION DATED JANUARY 22, 2004

This is in response to the office action originally mailed on September 23, 2003 but with a blank list of references, the term for responding to which was reset by the communication of January 1, 2004 providing the missing information and the new reference. A check for \$ .... is submitted with respect to the fees for additional claims submitted herein.

Amendments to the claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks commence on page 8.

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8(a))

I hereby certify that, on the date shown below, this correspondence is being:

MAILING

 $\boxtimes$ 

deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P. O. Box 1450 Alexandria, VA 22313-1450.

Date: April 22

Signatur

John Richards

(type or print name of person certifying)

04/28/2004 FMETEKI1 00000060 09890989

01 FC:1202 02 FC:1201 486.00 OP 86.00 OP Practitioner's Docket

U-013589-7

**PATENT** 

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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PETER DAVID DAVIS

Serial No.:

09/890989

Group No.:

1642

Filed:

**DECEMBER 14, 2001** 

Examiner:

MISOOK YU

For:

COMBINATIONS FOR THE TREATMENT OF DISEASES INVOLVING

**ANGIOGENESIS** 

**Commissioner for Patents** 

P. O. Box 1450

Alexandria, VA 22313-1450

#### AMENDMENT TRANSMITTAL

WARNING:

Failure to file a complete response in compliance with  $\S$  1.135(c) leads to a reduction in patent term

adjustment - See § 1.704(c)(7).

1. Transmitted herewith is an amendment for this application.

#### STATUS

□ a small entity.

X other than a small entity.

#### CERTIFICATION UNDER 37 C.F.R. 1.8(a) and 1.10\*

(When using Express Mail, the Express Mail label number is mandatory; Express Mail certification is optional.)

I hereby certify that, on the date shown below, this correspondence is being:

#### MAILING

X deposited with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

37 C.F.R. 1.8(a)

37 C.F.R. 1.10\*

X with sufficient postage as first class mail.

as "Express Mail Post Office to Address"

Mailing Label No. \_\_\_\_\_ (mandatory)

TRANSMISSION

☐ transmitted by facsimile to the Patent and Trademark Office.

Date: April 22, 2004

IOIDI PIGUADDO

Signature

(type or print name of person certifying)

Only the date of filing (§ 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under § 1.8 continues to be taken into account in determining timeliness. See § 1.703(f). Consider "Express Mail Post Office to Addressee" (§ 1.10) or facsimile transmission (§ 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

## **EXTENSION OF TERM**

NOTE:	E: "Extension of Time in Patent Cases (Supplement Amendments) — If a timely and complete response has bee after a Non-Final Office Action, an extension of time is not required to permit filing and/or entry of an add amendment after expiration of the shortened statutory period.						
	entry o, statutoi Notice	f a Notice of Appeal or ry period unless the time	filing and/or entry oj ly-filed response plac l within the shortened	f an additior ed the applic	nal amendment after cation in condition fo	uired to permit filing and/or expiration of the shortened r allowance. Of course, if a s ceased to run." Notice of	
NOTE:		See 37 C.F.R. §1.645 for extensions of time in interference proceedings, and 37 C.F.R. § 1.550(c) for extensions of time in reexamination proceedings.					
NOTE:	process that are request, in which on the a notifyin filed. Th	ing or examination of an e taken to reply to any n measuring such three-m h case the period of adjust lay after the date that is t g the applicant of the rej	application for the cu otice or action by the conth period from the c timent set forth in § 1. three months after the ection, objection, arg atutory period, for rep	mulative tota Office mak date the notic 703 shall be date of mail ument, or oti	al of any periods of tin ing any rejection, ob ce or action was maile reduced by the numbo ing or transmission o her request and endin	sonable efforts to conclude the in excess of three months iection, argument, or other ad or given to the applicant, ar of days, if any, beginning f the Office communication g on the date the reply was r notice has no effect on the	
3.	The pr	oceedings herein are	for a patent applie	cation and	the provisions of	37 C.F.R. 1.136 apply.	
		(0	complete (a) or (b	), as appli	cable)		
	(a)	• •	petitions for an ex C.F.R. 1.17(a)(1)-(			.F.R. 1.136 nonths checked below:	
		Extension (months)		for other	than	Fee for small entity	
1.		one month	\$	110.00		\$ 55.00	
		two months	\$	420.00		\$ 210.00	
		three months	\$	950.00		\$ 475.00	
		four months	\$ 1	,480.00	;	\$ 740.00	
		five months	\$ 2	,010.00	:	\$ 1,005.00	
		1		Fee:	\$		
If an ac	lditional	extension of time is	s required, please	consider t	his a petition there	efor.	
		(check a	nd complete the n	ext item, ij	f applicable)		
						e fee paid therefor of l months of extension	
		Extension	fee due with this r	request \$ _			
			OR				
			UK				

X

(b)

(Amendment Transmittal—page 2 of 4) 9-19

Applicant believes that no extension of term is required. However, this is a conditional petition being made to provide for the possibility that applicant has

inadvertently overlooked the need for a petition for extension of time.

#### FEE FOR CLAIMS

The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below: 4.

	((	Col. 1)	(Col. 2)	(Col. 3)	SMA ENT		OTHER THA SMALL ENT		
	Rei	laims naining After endment	Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee	OR	Rate	Addit. Fee
Total	*47	Minus	**20	= 27	x \$ 9=	\$		x \$ 18=	\$486.
Indep.	*4	Minus	***3	= 7	x \$ 43=	\$		x \$ 86=	\$86.
□First	Present	tation of M	Iultiple Depend	lent Claims	+ \$145=	\$		+ \$290=	\$
				To Addit		\$	OR	Total Addit. Fee	\$572.

If the entry in Col. 1 is less than the entry in Col. 2, write "O" in Col. 3,

**WARNING:** 

"After final rejection or action ( $\S$  1.113) amendments may be made canceling claims or complying with any requirement of form which has been made." 37 C.F.R. 1.116(a) (emphasis added).

(complete (c) or (d), as applicable)

(c) No additional fee for claims is required.

OR

X (d) Total additional fee for claims required \$572.00

### **FEE PAYMENT**

5.	X	Attached is a check in the sum of \$572.00_	•
		Charge Account No. 12-0425 the sum of \$	
		A duplicate of this transmittal is attached.	

If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. I of a prior amendment or the number of claims originally filed.

#### FEE DEFICIENCY

NOTE: If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, (1065 O.G. 31-33).

6. A If any additional extension and/or fee is required, charge Account No. 12-0425.

#### AND/OR

☐ If any additional fee for claims is required, charge Account No 12-0425

SIGNATURE OF PRACTITIONER

Reg. No.

Tel. No.

Customer No.

(type or print name of practitioner) & PARIS

26 WEST 61st STREET

P.O. Address Reg. No. 31053 (212) 708-1915

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